



HOLY CROSS
HIGH SCHOOL

LEGENDS HALL

DONOR:

Name: _____

Address: _____ Email: _____

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PAYMENT:

Enclosed is my payment of \$ _____

Please charge my credit card: \$ _____ MasterCard___ VISA___ AmEx___

Credit Card Number: _____ Expira Date: _____

Name on the card: _____

My Gift for Legends Hall:

___ WALL MOUNTED JERSEY \$1,000 in honor of _____

College Name _____ Jersey # _____ Sport _____

___ RECOGNITION FLOOR TILE Option # _____

Option 1

\$250, 4 x 8
3 lines (20 characters/line)

Option 2

\$500, 8 x 8
6 lines (20 characters/line)

Option 3

\$750, 12 x 12
9 lines (25 characters/line)

Please list what you would like to the tile to say:
(one character per dash)

Line # 1 _____

Line # 2 _____

Line # 3 _____

Line # 4 _____

Line # 5 _____

Line # 6 _____

Line # 7 _____

Line # 8 _____

Line # 9 _____

___ SPONSORSHIP

Benefactor \$10,000 + Amount \$ _____

Legends \$5,000 - \$9,999 Amount \$ _____

Knights \$2,000 - \$4,999 Amount \$ _____

Green & Gold \$500 - \$1,999 Amount \$ _____

Patron Sponsor \$50 - \$499 Amount \$ _____

Thank you for supporting Legends Hall.